COMPLETE IF KNOWN

366325-525

Perrut, Michel

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION

Attorney Docket Number

First Named Inventor

(37 CFR 1.63)		Application Number					
Declaration	Declaration	Filing Date					
Submitted OR	Submitted after Initial Filing (surcharge	Art Unit					
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name					
As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
METHOD AND INSTALLATION FOR SETTING IN ADSORBED STATE ON A POROUS SUPPORT ACTIVE COMPOUNDS CONTAINED IN A PRODUCT							
	(Title of the Invention)						
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY)		as United States A	Application Number	or PCT International			
L							
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT							
international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
99/12005	FR	09/27/1999					

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Fax émis par : 33 3 83 31 24 83



SEPAREX



PTC/S8/01 (10-01)
Approved for use through 10/31/2002, CMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nur or Bar Code L	1 25	561 o	R Con	respondence eddress below	
Name					
Address					
City		State		ZIP	
Country	Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful felse statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the velidity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :	A petition I	nas been filed fo	r this unsign	ned inventor	
Given Name Michel (first and middle [if any])		Family Name or Sumame	Perrut		
Inventor's Signature Active Por	rit			Date 14.03.02	
Residence: City Nancy \	State	Country	France	French Citizenship	
25, rue de Santifontaine Mailing Address					
54000 Nancy	State	ZIP		France Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					
Given Name Wiesław (first and middle [if any])		Family Name or Surname	Majewski		
towentor's Waster Majerin				Deste	
Residence: City	State	Country	FR	FR Cktzenship	
"Le Meridien", 4, terrasse des Vosges Mailing Address					
54520 Laxou Cky	State	ZIP		FR Country	
Additional inventors are being named on the	supplemental Additio	nal inventor(s) sne	et(s) PTO/SB/0	2A attached hereto.	



Please type a plus sign (+) inside this box +

PTO/SB/81 (02-01)

Approved for use through 19/31/2002, CMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Papenwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

SEPAREX

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Not Yet Assigned			
Filing Date	Filed Herewith			
First Named Inventor	Perrut			
Tide	Method and Installation			
Group Art Unit	Not Yet Assigned			
Examiner Name	Not Yet Assigned			
Attorney Docket Number	366325-525			

I hereby app	xxint:				
Practitioners at Customer Number 25561					
OR					
☐ Practitio	oner(s) named below:				
ļ	Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
	the correspondence address for the above-ide				
✓ The above	e-mentioned Customer Number.	,,			
OR Prostitions	ers at Customer Number	Place Customer Number Bar Code			
OR Practitione	is at customer number	Label here			
Firm or Individual N	lame				
Address					
Address					
City	<u>-</u>	State Zip			
Country					
Telephone		Fax			
	lam the:				
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	Michal Daniel				
Signature	Richard Comme				
Date					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
☐ 'Total offorms are submitted.					
then Hour Statement. This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments of					

the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patients, Washington, DC 20231.